



GOVERNOR'S PUBLIC HEALTH COMMISSION

Listening Tour Summary

Listening Tour Locations Represented in Summary: Jasper, New Castle, Huntington

Total Number of Attendees: 40

Counties Represented (number of attendees): Allen (8), Brown (1), Daviess (3), Delaware (1), Dubois (3), Gibson (1), Hancock (5), Henry (4), Huntington (2), Knox (2), Marion (1), St. Joseph (1), Vanderburgh (3), Wayne (2), Whitley (3)

No. of Comments	Topic	Comment Summary
14	COVID vaccine and mask mandates (opposed)	<ul style="list-style-type: none"> • Opposed to COVID vaccine and mask mandates, with some respondents particularly concerned with vaccines and mask mandates for children (14)
11	Governance/Infrastructure	<ul style="list-style-type: none"> • Opposed to health department officials legislating, governing, or having financial discretion (3) • Recommend educating local politicians and government on the role of local public health departments to better facilitate distribution of needed funding (2) • Opposed to the expansion/control of public health departments (2) • Recommend surveying local health departments to gain local buy-in before making changes at the state level (1) • Opposed to the process of appointments to health boards (1) • Proposed a review of CMS guidelines that enact certain mandates on healthcare facilities, which inhibits the ability of staff to do their jobs (1) • Recommend that IDOH have a court order to exercise any emergency powers (1)
10	Workforce	<ul style="list-style-type: none"> • Increase funding for county and local health departments to support workforce recruitment and retention (7) • Recommend licensure reciprocity or entering into the Interstate Medical Licensure Compact (1) • Increase Medicaid rates which cause difficulty paying and retaining staff when volumes of Medicaid patients continue to increase (1) • Create guidelines for counties to set appropriate pay scales for staff, allowing departments to stay competitive in the market and retain more workers (1)

No. of Comments	Topic	Comment Summary
10	Public health funding	<ul style="list-style-type: none"> • Provide a greater source of sustainable state funding to develop, strengthen, and expand successful public health programs at the state and local levels. Allow for a more regional approach where local health departments, local elected officials, and communities, in partnership with the IDOH, determine how to distribute funding/financial support (3) • Increase funding for public health programs such as diabetes, obesity, drug and alcohol abuse, and mental health, e.g. use of supportive collaborations, nurse navigators (2) • Recommend consideration of per capita funding rather than per program funding; less reliance on grants (2) • Provide discretionary funding so local health departments can be responsive to local health issues (1) • Increase funding for the Indiana Environmental Health Association which often addresses many public health issues (1) • Provide continued funding for emergency preparedness in all local health departments (1)
8	Other	<p>Eight commenters addressed the following:</p> <ul style="list-style-type: none"> • Voiced support of collaborations between local health departments and law enforcement agencies to address public health issues such as the opioid crisis, prostitution, and other issues, and strongly recommended this model be used throughout the state (1) • Recommend consideration of a statewide SNAP matching program to help vulnerable residents and those in food deserts gain access to healthy, nutritious food to prevent chronic health conditions (1) • Create legislation to support vulnerable elders in the community who are living in unhealthy home conditions; allow for inspectors to ensure structural safety (1) • Increase/strengthen collaborations between area agencies to provide programs and services for older adults, especially those who are homebound (1) • Address gun violence through improving green spaces in neighborhoods (1) • Increase access to care by investing in people and communities of color, vulnerable populations, and marginalized communities through collaborating with local organizations who work in those communities. Ensure staff and leadership working in those communities are diverse and culturally competent (1) • Consider increased incentives and/or support for medical students to become forensic pathologists (1) • Opposed to House Bill 1245 [related to onsite sewage systems and permitting] (1)

No. of Comments	Topic	Comment Summary
5	Adolescent/childhood health	<ul style="list-style-type: none"> • Increase health education for children/adolescents and parents, especially around drug use/abuse (1) • Increase programs focused on childhood trauma to mitigate downstream effects, such as substance abuse (1) • Increase nutrition programs in schools and continue to provide free lunches for all students (1) • Recommend schools have a full-time registered nurse to support physical health, mental wellness, and academic readiness (1) • Provide funding to schools to offer a fair industry-standard wage to nurses working in school settings (1)
5	Data/integration	<ul style="list-style-type: none"> • Voiced concern around the sharing of health data through EMRs (4) • Emphasized the importance of providing actionable, real time, and quality data to local health departments; especially data focused on health equity issues (1)
3	Public health resources/support	<ul style="list-style-type: none"> • Offered gratitude to the state and local health departments for supporting schools through the pandemic, through webinars, offering resources, and continued dialogue (1) • Emphasized the importance of local health departments and their connection to the community (1) • Recommend decentralizing health care and instead bringing it to the community to make it more accessible (1)